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### BREAKING NEWS:

## Governor Parson approves state budget with \$20 million allocated for future CTF facilities and infrastructure grants

The Children’s Trust Fund (CTF) is thrilled to announce that the Missouri General Assembly has allocated \$20 million in funds to CTF for Fiscal Year 2023 (July 1, 2022-June 30, 2023) to support *facilities and infrastructure projects for community-based organizations* working to prevent and alleviate child abuse and neglect.

Because these funds were just approved last week [when the Governor signed the Fiscal Year 2023 budget](#), CTF has not yet developed funding guidance or determined allowable uses for these funds. **Please know that we will work as quickly as we are able to release a Request for Proposals and hope to do so by early August 2022.** We will attempt to make the application process as short and minimally burdensome as possible.

We encourage all of our partners to *begin thinking now* about what one-time facility or infrastructure projects would be the most helpful and meaningful to your work. Because of our tight turn around and desire to get these funds out as quickly as possible, the application period will likely be short.

CTF is immensely grateful to State Budget Chairman, *Rep. Cody Smith*, who added these funds to the state budget. Chairman Smith believes that non-profits preventing and addressing child abuse and neglect perform some of the hardest and most meaningful work in the state. These additional funds are a recognition of your work and those that you serve.

### PUBLIC EDUCATION:

## Audiences Tune In to CTF’s “Something We Agree On” Campaign

July 8, 2022

### "Something We Agree On" 3-month Reach and Engagement Data

Use this interactive table to browse a few noteworthy statistics we obtained from our media partner, *Bucket Media*.

[View the slideshow here](#)

CTF Sexual Abuse Prevention Video

Copy link

Watch on YouTube

CTF’s staff and Board would like to say “thank you” for the feedback and responses you’ve provided so far on the launch of our Positive Community Norms campaign: **“Something We Agree On.”**

Our primary focus during the first 3 months of the campaign has been delivering messages about simple strategies to prevent child sexual abuse. The positive norms we highlighted was that **“86% of parents talk with their children about personal boundaries.”**

Use the interactive table to the left to browse a few noteworthy statistics we obtained from our media partner, *Bucket Media*. Our hope continues to be that these positive media results translate to tangible outcomes in the families and communities YOU serve!



**The average age of disclosure of child sexual abuse is 52 years old... We have to be willing to talk about it to put an end to it; the secrecy and stigma have to end.**

**Cara Gerdman**  
Executive Director, Kids’ Harbor, Inc.





## PUBLIC EDUCATION:

### CTF Collaborates to Advance Missouri Safe Sleep Education

In 2018 CTF entered into collaboration with agencies and organizations across the state with the shared goal of **REDUCING INFANT SLEEP RELATED DEATHS BY 20% BY THE END OF 2022**. Despite COVID-related shutdowns and setbacks, CTF and the *Safe Sleep Coalition* are pleased to report significant progress on our [Safe Sleep Strategic Plan](#), as highlighted in our [Safe Sleep Work Plan](#).

So far this year, we have solidified a **consistent and unified message**, established a clear and **up-to-date network** for disseminating media and resources, and launched the **Safe Sleep Missouri website** as the hub for education and training.



### COMING SOON TO MISSOURI: “Awareness to Action” Policy & Procedure Training



We may not like to think about it – or even believe it – but children experience sexual abuse at alarming rates. **1 in 10 children will be sexually abused by their 18th birthday.** ([d2l.org](#))

As adults, we can do better to protect our children. We interact with children where they play, learn, and grow. How we interact in these settings can add to the adversity and trauma a child experiences or can create opportunities for care and thriving.

Many of these interactions happen at organizations like **schools, churches, afterschool programs, day camps, daycares, sports leagues, and many other places** where kids live their lives. There is an opportunity to create organizational cultures where child sexual abuse is discussed, addressed, and **prevented**. Shedding light on this traditionally taboo topic will create safer environments for children!

## 1 in 10 children will be sexually abused by their 18th birthday

Missouri KidsFirst (MKF) and the Metropolitan Organization to Counter Sexual Assault (MOCSA) have teamed up to work toward the goal of creating safer environments that center child wellbeing through policy and procedure development and review. The collaborators were fortunate to find an existing training, **Awareness to Action**, developed by *Children’s Wisconsin* and the *Wisconsin Child Abuse and Neglect Board*. ([a2awisconsin.org](#))

Children’s Wisconsin developed and has provided the training to organizations in Wisconsin for 10 years. With permission, **MKF and MOCSA are adapting this training to meet the needs of Missouri organizations.**

The adapted training, Awareness to Action Missouri, is in the development and pilot phase.

#### Awareness to Action Missouri

Awareness to Action Missouri is a training and technical assistance program for organizations based on the *Center for Disease Control and Prevention’s* guide **Preventing Child Sexual Abuse Within Youth-serving Organizations**. Over the course of **6 months**, participating organizations will receive in-depth training and support to implement prevention strategies to protect the children in their programs. Throughout the training participants will hear from experts in the field of child sexual abuse prevention and organizations who have taken steps to **enhance their ability to protect children in their programs.**

#### Participation in this training includes:

- An initial **3-hour training** to learn the **6 Best Practices** developed by the Centers for Disease Control and Prevention to protect children through sound policies and procedures.
- A structured **action planning phase** to develop **concrete next steps** based off each Best Practice.
- Technical assistance** and support from *Missouri KidsFirst* and *MOCSA* staff, including **follow-up meetings** 3 and 6 months after the initial training.
- Formation of a **community of practice** with **other organizations** embarking on prevention policy work.

#### Awareness to Action Missouri

*Awareness to Action Missouri* training is being developed with funds from Missouri Children’s Trust Fund’s Child Sexual Abuse Prevention Initiative. Pilot trainings will be held in the Kansas City Area in **June/July 2022**. Additional CTF grantees will have the opportunity to share the training with their communities in **Fall 2022**. Missouri KidsFirst hopes to provide access to the training **statewide at low or no cost in 2023**.

## GRANTS:

### CTF Recommends \$341,911 to be awarded for Immediate Needs

A review panel consisting of 2 CTF Board members, 2 CTF Staff, and 1 representative from *Missouri Children’s Division* scored CTF **“Immediate Needs”** funding applications on various criteria, with the most heavily-weighted questions relating to:

- Whether an applicant’s proposed use of funds was clear and consistent with the intent of the funding opportunity
- The amount of COVID-relief funding previously received by the applicant
- The level of need for additional funding
- Alignment of the applicant’s and CTF’s mission

Based on averaged total scores and deliberation over the eligibility/need of lower-scoring applications, the review panel has officially recommended that the Board consider funding **the these 17 applications, totaling \$341,911.**





HERO HIGHLIGHTS:

Two Questions for Darrell Missey, Director of Missouri’s Children’s Division

A note from Emily:

A few weeks ago, I had the opportunity to sit down with the **Honorable Judge Darrell Missey**, who took on the role of **Director at Missouri Children’s Division** earlier this year. As you might expect, Judge Missey has been busy. While most of our discussion centered around shared challenges and the ways our two organizations work together to ensure the safety and wellbeing of Missouri’s children, **I had my team follow up with a few important questions** I knew would be of most interest to our partners. First, I wanted to find out **what has inspired Darrell most** – from the beginnings of his career down to his latest daily duties. Second, I thought it would be insightful for Darrell to **summarize his top 3 priorities or goals** as CD’s Director. Some key themes resonated with me when I read Judge Missey’s response: **proactivity, prevention, and empathy for families**. I really think his words will resonate with you, too. I hope you’ll take a few moments today to read what he has to say.

With gratitude,  
*Emily van Schenkhof*



Darrell Missey, Director of the Missouri Children’s Division

I realized that but for the grace of God, **those families were my family, and that foster kid was me**

Question: What are your top 3 Priorities:

**Darrell Missey:** All of my priorities are what I believe is necessary for us to take care of kids and families. Given our circumstances at this time, my top priorities are as follows:

1. Getting the agency fully staffed.

This means filling the open vacancies we currently have, and making sure we really have all of the budgeted positions we need. I believe that we need to take a close look at expanding our workforce to include workers dedicated to prevention and family preservation.

2. Reducing the number of children in foster care.

Missouri has double the national average of kids in care, coming in at fifth in the nation per capita. Foster care comes at a heavy emotional and psychological price for the kids who are placed there, and we need to keep them out of the system if we can do so safely, or move them out as promptly as possible. Again, we need to look at prevention of child abuse and neglect, and we need to move children who are in the system to a long term home as soon as possible, whether the outcome be reunification, guardianship, or adoption.

3. Moving the child welfare system toward a more proactive approach.

Over my entire legal career, I observed a child welfare system that is reactive and driven by fear. Something bad happens, and we react. How do we react? Based on our fear of the worst possible outcome. We need to replace that reactive fearful culture with a proactive hopeful culture that is informed by evidence and best practice.

Question: What is your biggest inspiration?

**Darrel Missey:**  
**My biggest inspiration is my own childhood family.** I came to Children’s Division because of them. I originally ran for judge twenty years ago because of them.

My parents were fantastic, but in the early 1970s, we faced serious challenges because of my mother’s severe bipolar disorder. Eventually, medications were developed that improved her condition dramatically, but in my younger childhood, my mom struggled, and once had to be placed in a mental hospital for three months. We endured difficult times, and often a really dirty house.

After I grew up and became a lawyer, I encountered juvenile cases where children were removed from their homes for far less than the troubles my family experienced in 1974. When I encountered those cases, I realized that but for the grace of God, those families were my family, and that foster kid was me.

I ran for judge to make sure that our system was fair. I left the bench and came to CD because I believe that we can limit foster care to those cases where children are facing serious danger, and we can help other struggling families to safely care for their children at home without inflicting the trauma of removal.

My inspiration comes from my sisters, Michelle and Danette, and my parents, Leroy and Diane. I came to Children’s Division with the hope that I could help make a better system for families like mine and kids like me.

To learn more about the Missouri Children’s Division, please go to:

<https://dss.mo.gov/cd/>

CTF is in regular communication with leaders in our state who are responsible for improving the practices and systems that serve our families and children. If you have a question or an idea you’d like us to pass along, please take a few minutes and share it using the form below.

Name

Email Address

Message

2 + 5 =

Send Your Message

I came to Children’s Division with the hope that I could help make a **better system** for *families like mine* and *kids like me*.





## POLICY UPDATES:

### “The State of Home Visiting,” by Joe Gallant, Kids Win Missouri

Missouri boasts a decades-long history of providing home visiting services to its families. The newly-formed **Office of Childhood** (OOC) within the **Department of Elementary and Secondary Education** (DESE) supports and administers home visiting services, and there is a presence of at least one home visiting program, or model, in every part of the state. The existence of the Office of Childhood and its leadership has been praised by stakeholders from across the state.

**Prior to the creation of the OOC**, the broader home visiting system suffered from a lack of consolidated governance. Home visiting services were historically delivered in silos across the state, which incentivized competition between the different home visiting models. Due to this history of the home visiting landscape in the state, the OOC has made it a priority to break down the silos that have existed in the past and **create a more cohesive system** that will better support providers and, most importantly, the families they serve.

While the creation of the OOC and the work being done by regional collaboratives, home visiting coalitions, individual providers, and parent advisory councils is demonstrating positive momentum, **plenty of work remains** to better support home visiting services in the state of Missouri. Some of the issue areas that have been identified are lack of awareness around home visiting, inequity in practices, workforce development, and the need for a centralized or coordinated referral and intake system.



#### “Apply an equity lens...”

When discussing the issue of **awareness**, both parents and providers shared that there is a lack of knowledge among families regarding how to enroll in services, what models are available in their region, or even that home visiting is entirely voluntary and meant to provide support, rather than initiate the state’s involvement in a family dynamic. Parents in particular have pointed to this as a barrier for accessing home visiting services, specifically in rural areas or families of color with low incomes in urban areas.

**Once enrolled in services**, however, parents report that home visiting services are incredibly helpful, and 99% of parents interviewed would recommend services to other families. The overwhelming praise for home visiting services by those who receive them is juxtaposed by the lack of awareness of these programs, and has led to robust discussions among providers, state officials, funders, and national centers for each home visiting model on how home visiting services can be elevated as a viable option, especially for families with identified risk factors.

The **inequities** that have historically existed in the home visiting land-

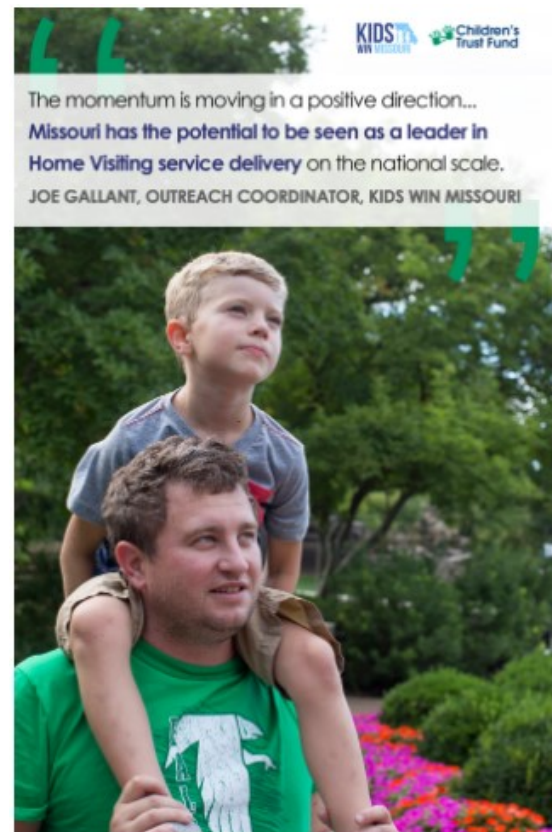
scape in Missouri are reflective of the broader inequities within our state. In rural areas, there is a severe lack of early care and education services in general, with many areas having only one provider spread across multiple counties. In urban and suburban areas, lack of transparency and disparities among marginalized racial and ethnic groups are the biggest challenges.

The OOC and its partners have made it a top priority to **apply an equity lens to home visiting across all racial AND geographic lines**, and home visiting stakeholders recognize the importance of calling attention to the disparities that have existed in the past and continue to exist today. Creating consumer advisory boards, emphasizing cultural competency and trauma-informed care, and building a workforce that represents the population that is being served are some of the ways providers are working to promote equity within the home visiting landscape.

#### “Align the family with the right home visiting provider...”

**Workforce development** is also an important component of this positive momentum in home visiting services. Home visiting stakeholders have engaged in discussions about licensing and certification requirements, compensation, recruitment, and professional development, and have highlighted many of the barriers that exist in each of these areas of workforce development. The OOC has recognized the importance of these discussions, and has **partnered with UMKC** to take on a broader early care and education workforce development project, in which home visiting is a key component.

With the creation of the OOC, home visiting stakeholders from throughout the state have recognized opportunities for collaboration and coordinated efforts in the implementation of home visiting services. Highlighting the shared goals of all home visiting stakeholders has suggested that **major systems changes**, specifically a centralized referral and intake system (CRIS) and robust data collection, will be crucial to improving the positive impact that home visiting has on the families that need it the most. Many stakeholders have additionally **suggested a shift to “prenatal enrollment,”** as Missouri’s has historically taken a postpartum approach to enrollment in home visiting services. This could be a key factor in raising the awareness of services and making service delivery more equitable and effective, as prenatal enrollment could highlight risk factors prior to the child’s birth, making it a priority to align the family with the right home visiting provider based on their needs.



#### “Improve services going forward...”

Highlighting these issue areas and engaging in productive conversations on each has led stakeholders from all parts of the state to describe the air in the home visiting landscape with one word: **collaborative**. Under the guidance and leadership of the OOC, along with the tireless work of providers, collective impact sites, advocacy groups, national centers, funders, and parent/consumer advisory councils, there is a great deal of cohesion in the state’s attitude toward home visiting as it exists and, more importantly, how we can improve services moving forward. The momentum is moving in a positive direction, and through continued collaboration and coordinated efforts on all fronts within home visiting, **Missouri has the potential to be seen as a leader in home visiting** service delivery on the national scale.

**CTF has most recently provided Capacity Building grant funding to Kids Win Missouri and serves as a collaborating partner with its leaders in the development of Missouri’s Office of Childhood.**





POLICY UPDATES:

NEXT STEPS: CTF Expects Statewide “Outcomes Rate Card” to be ready as soon as 2023

Over its 38-year history, the Missouri **Children’s Trust Fund** (CTF) has seen the transformative impact of home visiting in improving infant, child, and maternal health. Through its grantee partners, CTF has served over 3,800 families, and continuously looks for new ways to increase impact and scale.

That’s why CTF launched a pay for outcomes initiative with its home visiting grantees in July 2021 by developing an **outcomes rate card** (ORC) inclusive of a menu of high-priority impact areas CTF hopes to achieve and an associated payment, or “price,” for each outcome achievement. The ORC provides new, **incremental funding to CTF grantees** based on the achievement of specific outcomes.

To date, CTF has authorized approximately \$29,000 in incentive payments across the first three state fiscal quarters of the ORC. Incentive payment funds are unrestricted and have been used in a variety of ways to improve overall programmatic functioning and sustainability.

Insights & Inspiration from Outcomes Rate Card Pilot

**Prior to the ORC pilot launch** in FY22, CTF funded home visiting providers were engaged in conversations to ensure support and buy-in of the pilot initiatives and proposed metrics. Providers vocalized overall support for CTF’s desire to tie payment to achieved outcomes while offering solutions and best-practice feedback, indicating their desire to inform future ORC iterations.

As a result of the pilot launch, providers began entering their quarterly performance data and began receiving monetary incentives for their achieved outcomes. Along with their financial incentives, providers receive **quarterly performance summaries** to ensure they are aware of their progress and/ or areas of need, which drives conversation for overall programmatic improvement.

What’s Coming Next?

One objective of CTF’s 2021 ORC was to **lay the groundwork for a broader pay for outcomes movement** across Missouri, including additional CTF pay for outcomes projects and, hopefully, others funded by key Missouri home visiting funders.

CTF is well on its way to meeting this objective. In collaboration with *Social Finance* and a growing team of private and public Missouri stakeholders, CTF is working to design a new statewide outcomes rate card that will include both CTF grantees and other home visiting providers across the state. Like the existing ORC, this new, statewide ORC will provide incremental incentive funding to home visiting providers across Missouri. The services enabled by the ORC will **focus on pregnant mothers who experience barriers to achieving positive health outcomes and live in communities that have experienced historic economic and social disinvestment**.

**CTF is currently in year “0,”** or the planning phase of this five-year project. During this phase, CTF is designing the statewide ORC by using learnings from the 2021 ORC and by conducting a series of assessments to support the metric selection process, including assessments of (1) historical provider performance, (2) existing data collection and reporting infrastructure, and (3) stakeholder engagement specific to feasibility, metric definition, measurement methodology, and timing.

Following the completion of the statewide ORC design, we will begin **building out the necessary infrastructure** to make it possible—we anticipate this to start close to July 2022. Key highlights here could be assistance to providers to streamline data collection and reporting, improving and/or building a centralized referral system, and setting up an evaluation to demonstrate the fiscal and social benefits of home visiting.

**We’re targeting a launch** of home visiting services and incentive payments enabled by the statewide ORC by early 2023, and envision it remaining in place for the following four years.

In the coming weeks, CTF and *Social Finance* will be engaging with key stakeholders (e.g., home visiting providers, funders, evaluator) to collaboratively develop and refine key components of the ORC and establish a robust feedback loop to ensure the final ORC aligns with the realities of service delivery.

This statewide ORC has the potential to advance equitable outcomes for Missouri’s mothers and babies. At the same time, we’re hoping to catalyze critical systems change by addressing systemic failures that lead to poor outcomes, allocating resources and services in a more equitable manner, and improving access for historically underserved communities. To achieve this change, the ORC will do the following:

- 1. Place an emphasis on reaching mothers early in their pregnancy to help promote healthy behaviors, as evidence indicates that home visiting’s impact significantly increases when mothers are enrolled prenatally
- 2. Align existing data sharing and reporting processes across providers to better equip stakeholders to continuously track performance and make data-driven adjustments to improve service delivery and outcomes
- 3. Establish a network of evidence-based home visiting providers across the state, unified by a centralized referral system that helps improve access to and connect mothers and babies with an appropriate provider
- 4. Contribute to the evidence base for upstream strategies that generate social and fiscal benefits for a range of stakeholders

We’re eager to hear what you think! Please reach out to Jennifer Sommerfeld, jennifer.sommerfeld@oa.mo.gov, with any questions or suggestions.

Stay “In-the-Know”

Sign up for our newsletter



Explore Past Issues



Nominate a “Hero”



What is First-Hand Insights?

We launched **First-Hand Insights** in 2021 to give our stakeholders **reliable information and real-life inspiration**.

We believe those working hardest on behalf of children deserve to hear directly from trusted sources and thought leaders in their field. Think of it as “**news for CTF insiders**,” a periodic, first-hand look at the tangible steps we take to protect and strengthen Missouri’s kids and families.



KEEP IN TOUCH

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